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## ILLINOIS DEPARTMENT OF PUBLIC HEALTH

### PERINATAL HEALTH SYSTEM OF ILLINOIS

### STATEWIDE QUALITY COUNCIL

October 8, 2014 2:00 p.m. – 4:00 p. m. James R. Thompson Center 9<sup>th</sup> Floor, 031 Conference Room 100 West Randolph Street Chicago, Illinois MINUTES

### Chair: Harold R. Bigger, MD

Attendees: Cora Reidl, Bernadette Taylor, Karen Callahan, Robin Jones, Pamela Wolfe, Lenny Gibeault, Maripat Zeschke, Deborah Rosenberg, Angela Rodriguez, Pat Prentice, Cindy Mitchell, Elaine Shafer, Ann Borders, Pat Bovis, Robyn Gude, William Mackendrick Richard Bessinger, Madiha Qureshi, Jenny Brandenburg

Absent: Trish O'Malley, Jodi Hoskins, Stephen Locher, (all excused) Phil Higgins

**IDPH Staff:** Brenda Jones, Andrea Palmer, Amanda Bennett

Guests: Myra Sabini, Judy King, Patricia Lee King, Ralph J. Kehl, Cecilia Lopez

#### I. Call to Order

#### Harold Bigger, MD

**II. Review of Minutes – June 11, 2014 Meeting:** The minutes were reviewed. Richard Bessinger indicated he was absent. Pat Bovis motioned that the minutes be approved, Cindy Mitchell seconded the motion. The minutes were approved with changes.

#### III. Levels of Care Task Force Report Raye-Ann O de Regnier, MD

The Levels of Care Task Force draft is 99% finished. There has been much input from Neonatologist, Surgeons and other members. There will be one final meeting in November to review the document and make any corrections or changes. A copy of the final report will be sent to all members of SQC. Recall the SQC made the motion to convene a taskforce to

review hospital levels of care and volume. The focus is on neonatal outcomes. That has been done. The membership thanked Dr. de Regnier for chairing the task force and producing about the report.

# IV. ILQPC

# Ann Borders, MD, MSC, MPH

The ILPQC is working on the grant to review best practices for development of the Collaborative. Deb Rosenberg and Cindy Mitchell are also working on the team. The grant would come through the Office of Women's Health at IDPH. There is a Kick-off meeting in Atlanta.. Collaboratives meet to get information from around the country. ILPQC is happy to have shared information

The Annual Conference will be in Naperville this year. Ann needs everyone's help in letting members and affiliates know about the conference. Last year there was a wait list. Participants should include OB's, MFM's, Nursing, Community Representatives and Quality Leaders. There will be breakout sessions for OB, Neo, and Families. Speakers include Marty McCaffery and Elliot Main. Teambuilding lectures will be given by Peter Grubb (Tenn) and Michael Krew (Ohio). Topics include Antenatal Steroids and current Breast milk practices. Tara Bristol will give a perspective on Families.

A Poster Session will be a major focus Some of the poster topics include: Neonatal Nutrition to improve growth in VLBW. The goal of the conference is to build value for hospitals and not just about sending data in . ILPQC wants hospitals to see this as a way for acknowledgement and not a burden. Shared data benefits all.

Foci for 2015 include:

NEO Abstinence Syndrome and Golden Hour

OB Birth Certificate Maternal Hypertension, Safe Mother Initiative

Hospital Engagement Efforts: Team calls Short u-tube video clips 30 minutes talks from IHI Face to Face ½ day QI education efforts ( possible next Spring)

Patti going to all Perinatal networks, She is encouraging Nursing Leaders and many OB's and MFM's to engage them in ILPQC efforts OB calls are currently the Second Monday of the Month from12:00-1:30 pm

Harold Bigger indicated his opinion that most of improvement in neonatal care is coming from the OB side. OB and NEO need to work together on items like the Golden Hour, breast milk and antenatal steroids.

## V. IDPH Update Brenda Jones, DHSc, MSN, RN, CCHC, WHNP-BC

Brenda reported on recent activities in the Department of Women's Health including the Annual conference to be held in Peoria in April 2015. Information on registration will soon be available. She also described efforts to staff the Perinatal Program as Charlene Wells retires.

Brenda recognized Charlene for her dedicated service to the Perinatal Program.

# VI. Update on Data Activities Deborah Rosenberg, PhD

Deb Rosenberg, is pleased with synergy around data, remarking teams have never been like this. She looks forward to good activity including partnering with ACOG on issues of safe motherhood. Kristen Rankin and Deborah Rosenberg are using hospital discharge data to look at severe maternal morbidity factors and will be teaching a course for the CDC..

Birth Certificate will be evaluated for QI at facility level. The project will use birth certificates to get increased data and pair with hospital discharge data.

## VII. Birth Certificate Initiative Update Cindy Mitchell, RN, BSN, MSLH

The Birth Certificate Initiative will be the major task for the SQC in 2015. Cindy's team has taken the 78 page instruction manual and made it user friendly. It will be sent to members. . ILPQC is on board with the project

Ann Borders said the CDC expects hospitals to build baseline accuracy. Collaboratives are doing this by education, webinars and monthly hospital calls.

Letter of support for the program are being requested from IDPH and IHA. The team will create a database for all hospital to participate. Objectives include measurement of how people improve at a hospital level, looking at ten charts per month with specific variables. The expectation is to meet 95% of the variables need to know where we are. Baseline data collection will then be used to determine areas needing the most improvement.

Andrea Palmer and Deb Rosenberg are doing a three month retrospective. Each hospital is getting a user ID for the RED CAP system. This is a very secure system that records name title e-mail data and phone number. The system will track the data and allow feedback to be given monthly

Variables will include 10 or 20 items Important things will be happening with Vital Statistics including how many certificates have missing variables.

Amanda Bennett spoke about the important variables -clinical and non-clinical. Many certificates are missing identification of conditions.

Induction and Augmentation discrepancies, social security numbers are found missing onhospital discharge data. Currently 14% are missing.

Other missing items include:

- Date of Prenatal Visit and number:
- Items that do not have definitions in the book over 30 + fields
- Pre-Pregnancy and gestational Diabetes,
- Hypertension,
- Antibiotics,
- Induction
- Augmentation
- Assisted ventilation
- Gestation
- P previous preterm deliveries
- Transfusion (yes/No)
- ICU admission

Robin Jones remarked that hospitals cannot expect a clerk to be responsible . The terms have changed including "intolerance to labor".

OHIO searched to get these definitions clarified from the EMR..

Deb Rosenberg indicated this is not performance measuring but a QI project. Andrea indicated that clarification of the definitions still have to conform to the CDC.

Random charts should be selected but a focus needs to be maintained on < 34 week charts and should include < 39 week deliveries and look at use of Antenatal Steroid.

Guidelines will be forthcoming.

**VIII. Tribute to Dr. Harold Bigger:** Members thanked Dr. Bigger for his service for over 15 years as the only chair of the SQC. The members acknowledged his hard work and participated in refreshment. He will be missed. Pat Prentice motioned adjournment at 4:10 pm.